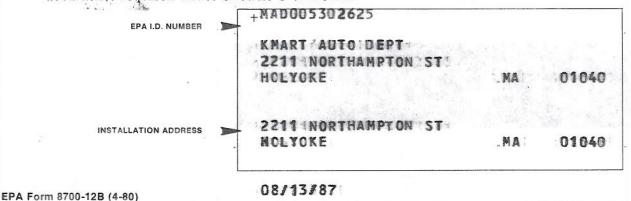


# ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.





# UNITEL TATES ENVIRONMENTAL PROYECTION & GENCY

REGION

J.F. KENNEDY FEDERAL BUILDING, BUSTON, MASSACHUSETTS 02203-2211

DATE: August 8, 1988

C.A. Smith, Store Manager K-Mart 2211 Northampton Holyoke, MA 01040

Dear Sir/Madam:

Region I of the U.S. Environmental Protection Agency received your facility's Application for EPA Identification Number. According to our records, this application was a duplicate submission and an EPA Identification Number was previously assigned to your facility.

The following information is provided for your records:

EPA I.D. NUMBER: MADO05302625

FACILITY NAME: K-Mart

FACILITY ADDRESS: SAME AS ABOVE

Please reference your EPA I.D. Number on all correspondence with the Massachusetts Department of Environmental Quality Engineering (DEQE) and the U.S. Environmental Protection Agency (EPA). If you have any questions with regard to this letter, please feel free to contact me at (617) 573-9632.

Sincerely yours,

Nadine M. Raniere

MA Waste Regulation Section

cc: Anne Crawley, DEQE

File

# APPLICATION FOR EPA IDENTIFICATION NUMBER

NOTIFICATION OF HAZARDOUS WASTE ACTIVITY IN MASSACHUSETTS

FOR OFFICIAL USE ONLY

	MAD 005 30Z 6Z5
	JUL 19 1988 EPA ID NUMBER MO DAY YEAR
-	DATE ISSUED
In orde	er to participate in the hazardous waste manifest system, each generator, recycler, transporter and receiving facility must have a federal identifica-
tion nu	umber, which is assigned by the Environmental Protection Agency (EPA). You should allow up to 6 months for the assignment of this number,
which	will be mailed to you. For a temporary number, call Massachusetts Division of Hazardous Waste (1-800-343-3420).
For as	sistance in completing this form, or to report any changes in your activity, call the Division's Compliance Assistance line (617-292-5898).
101 13.	summer in completing this form, of the report any changes in your activity, can the Division's Compliance Assistance line (017-292-3898).
1.	NAME OF NOTIFYING COMPANY Do not punctuate. Leave a blank box between initials, as in
	Kmart Store
11	344U NO. 4 D D D D D D D D D D D D D D D D D D
11.	MAILING ADDRESS Abbreviate Street or similar words.
	NUMBER STREET OR PO BOX
	2211 Northampton
	2 2 1 I Northampton  CITY OR TOWN  STATE ZIP CODE
	HOII IS TO KEEL THE
111.	SITE OF HAZARDOUS WASTE ACTIVITY Each location with hazardous waste activity needs a separate ID.
	NUMBER STREET
104	
	CITY OR TOWN STATE ZIP CODE
	Children and the control of the cont
IV.	STANDARD INDUSTRIAL CLASSIFICATION A list of common SIC codes is attached, or consult industry fact sheet.
	SIC CODE DESCRIPTION SIC CODE DESCRIPTION
•	5 3 General Merchandise Store
V.	CONTACT PERSON To be telephoned regarding information on this form.
•	NAME (FIRST, LAST)  TITLE  TELEPHONE
	C A Smith
VI.	OWNERSHIP Enter the name of the person or corporate entity which is the legal owner of the business, and the same for the
	property. Check NON-FEDERAL unless your corporation is owned or operated by the federal government.
	LEGAL OWNER OF BUSINESS
	K mart Corporation FEDERAL NON-FEDERAL X
	LEGAL OWNER OF PROPERTY
	FEDERAL NON-FEDERAL
	Two west Holly mart Assoc
VII.	DESCRIPTION OF HAZARDOUS WASTES To complete this item you may need to have your waste analysed. Consult
	your industry fact sheet or the Massachusetts Hazardous Waste Regulations - 310 CMR 30.000 - obtained from the State Book-
	store, State House, Boston (617/727-2834). Enter a 4-digit code for each of your hazardous wastes. Attach additional sheet if
	necessary. Transporters are not required to complete this item except for wastes they generate themselves.
	$m \neq 0 \mid D \mid 0 \mid$

VIII. TYPE OF HAZARDOUS WASTE ACTIVITY Refer to Guide to Determining Status and Regulatory Requirements, which is attached.

Check where applicable:	
MADA DIDISI BIDIKI KAZUT	
	R CATEGORIES
Maximum Monthly Volumes of Hazardous Waste (see 310	CMR 30.100) 889/ 91 JUL
Large Quantity (2200 lbs/265 gals or more	in a month)
Small Quantity (less than 2200 lbs/265 gal	
YOU GENERATE LESS THAN 220 LBS/27 GALS A MONTH AND PLAN	TO REGISTER AS A VERY SMALL GENERATOR, CHECK HERE
aximum Monthly Volumes of Waste Oil (Massachusetts re	egulated hazardous waste)
Large Quantity (2200 lbs/265 gals or more	in a month)
Small Quantity (less than 2200 lbs/265 gal	s in a month)
YOU ARE A SMALL QUANTITY WASTE OIL GENERATOR AND USE	A LOG, OR A VERY SMALL GENERATOR OF WASTE OIL, CHECK HERE
EPA STATUS (refer to column 2 in the	he Guide to Determining Status)
	2 2 1 1 8 0 2 1 h a m p c o n
Wastewater Treatment Unit (310 CMR 30.	
(check only if wastewater prior to treatment is a	hazardous waste)
LICENSE OR E	PERMIT CATEGORIES THATE SHIMES
Transporter (310 CMR 30.400)	THE TOTAL CONTROL OF THE TOTAL
Treatment, Storage, Disposal Facility (31	10 CMR 30 600)
	WANT NO YELD
Recycler (310 CMR 30.200)	
	WENT COMP TO THE SECOND TO THE
	VITY (310 CMR 30.244-256)  Burn waste fuel (recycling permit required)
Blend or market waste fuel	
*	of above, specify: BURNING COMBUSTION DEVICE:
TYPE OF WASTE FUEL	SPACE HEATER
HAZARDOUS WASTE FUEL: OFF-SPECIFICATION USED OIL FUEL	UTILITY BOILER
(TABLE 310 CMR 30.216)	INDUSTRIAL BOILER
SPECIFICATION USED OIL FUEL	INDUSTRIAL FURNACE
the second section of the community and the community and the second section and the section and the second section and the section and the second section and the second section and the sectio	A CHARRANTE From the name of the name or exception of
X. CERTIFICATION	
	to the information submitted in this document and all attached docu
I certify under penalty of law that I have personally examined and am	familiar with the information submitted in this document and all attached documents and all attached documents are submitted information. I believe that the submitted information is a least the passibility of time.
ion is true accurate and complete. I am aware that there are signifi-	icant penalties for submitting false information, including the possibility of fine
and imprisonment	
In addition I understand that any material supplied with this application	on will not be considered confidential unless I have specifically requested that ermination of confidentiality in accordance with 310 CMR 3.00, Regulations Go
rning Access to and Confidentiality of Department Records and Files un	nder the Hazardous Waste Management Act.
SIGNATURE NAME & O	FFICIAL TITLE (TYPE OR PRINT)  DATE SIGNE
Demil Helful DIRECTO	ONMENTAL HEALTH
ENTITIE	ONMENTAL HEACTH
RETURN TO: NOTIFICATIONS	of the country of the country of the

EPA - Waste Management Division MA Waste Management Branch HRR-CAUS John F. Kennedy Federal Building Boston, MA 02203

Olt 7/57 MAR 6 198



# COMMONWEALTH OF MASSACHUSETTS Department of Environmental Quality Engineering





For Official Use Only  INSTALLATION'S EPA I.D. NUMBER  DATE ISSUED  mo. day year  MAD 005302625 03 06 7			
Print or type with ELITE type (12 characters/inch) in the boxes. Refer to Line-by-Line Instructions &			
1. NAME OF INSTALLATION (Do not punctuate or use initials)			
II. INSTALLATION MAILING ADDRESS Street or Post Office Box			
City or Town State Zip Code  Halgade			
III. LOCATION OF INSTALLATION Street or Route Number  HAMPOEN			
City or Town State Zip Code 0/3			
IV. PRINCIPAL ACTIVITY 4 digit SIC number Description 4 digit SIC number Description 4 digit SIC number Description			
V. INSTALLATION CONTACT Name (last, first)  Title  (area code) (number)  (area code) (number)			
VI. OWNERSHIP  Name of Installation's Legal Owner  Name of the Legal Owner of the Property  Name of the Legal Owner of the Property			
VII. TYPE OF HAZARDOUS WASTE ACTIVITY Enter X on the appropriate line.			
Hazardona Monta Activity  Waste Fuel Activity  Waste Fuel Burning Type of Combustion Device  Large quantity generator  Small quantity generator  Other marketer  Dtility boiler  Transporter *  Burner **  Industrial boiler  If any of above, specify:  Waste Fuel Burning Type of Combustion Device  It a burner, specify:  Industrial boiler  Industrial furnace  Hazardous waste fuel  Wastewater Treatment Unit  A Massachusetts license is required for these activities.  Secification used oil fuel  Secification used oil fuel			
Please continue on the second page of this form.			

VIII.DESCRIPTION OF HAZARDOUS WAST Enter the four-digit number from the Massachu stallation handles. Use additional sheets if nece	setts Regulations 3	10 CMR for each list	ed hazardous waste wl	nich your in-		
D codes - Characteristic Non-List	ed Hazardous	Wastes. See 30	.121 through 30.	125.		
F and M codes - Hazardous Wastes	from Non-Spec	ific Sources.	See 30.131.			
made III	FR		Wall Alexander	ha S		
		THE SERIES	ION I I I I I I I I I I I I I I I I I I			
K codes - Hazardous Wastes from S	pecific Sourc	es. See 30.132	14/2/24/2			
	77 62					
			I OF THE PARTY OF	10 April III		
U codes - Commercial Chemical Pro	duct Hazardou	s Wastes. See	30.133.			
	1911 5/63		1 3801			
	de la gib i-		ACT VIV			
P codes - Acutely Hazardous Waste	P codes - Acutely Hazardous Wastes. See 30.136.					
	HTTG.			Ш		
IX. COMMENTS		8	IIP Z.A 1 E.Z.Z. Allatood's Legal Owner	Vt. OWNERSH		
☐ Sheet Attached			A Santa D	Same of t		
X. CERTIFICATION  I certify under penalty of law that I have personally examents, and that based on my inquiry of those individuals in true, accurate, and complete. I am aware that there are sign prisonment.  In addition, I understand that any material supplied wis such material be kept confidential and and the Department Governing Access to and Confidentiality of Department Re	nmediately responsible nificant penalties for su ith this application will t has made a determina	with the information subn for obtaining the informat bmitting false information, not be considered confide tion of confidentiality in a	tion, I believe that the submit including the possiblity of fir ntial unless I have specifically ccordance with 310 CMR 3.0	ted information is ne and im-		
Mike Halschul	NAME & OFFICE	AL TITLE (type or pri		11-87		



## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

## REGION I

J. F. KENNEDY FEDERAL BUILDING, BOSTON, MASSACHUSETTS 02203

FEB 2 7 1987

RE: Notification of Hazardous Waste Activity

Dear Sir/Madam

The United States Environmental Protection Agency (EPA) is returning your Notification of Hazardous Waste Activity form due to the following deficiencies noted in the boxes checked.

- [ ] o The applicant failed to enter in Part I of the application the Name of the Installation.
- [ ] O The applicant failed to enter in Part II of the application the Installation's Mailing Address.
- [] O The applicant failed to completely fill out the Installation Address as required in Part III. Please note the Installation Address must include a street number and a street name. This information can be obtained through the post office in your area. If the street number and street name are unobtainable please complete the attached certification.
- [ ] O The applicant failed to indicate in Part V of the application the Installation Contact.
- [ ] The applicant failed to indicate the installation's ownership in Part VI of the application.
- [ ] o The applicant failed to indicate the Legal Property Owner in Part VI of the application.
- The applicant failed to indicate the type of hazardous waste activity (Part VII of the application) which takes place at the facility. Check the applicable box identifying the type of hazardous waste activity at your facility. If additional comments are warranted, a space is provided in Part IX.
- [ ] O The applicant failed to enter in Part VIII the four-digit number from the Massachusetts Regulations 310 CMR for each listed hazard-ous waste which the installation handles.
- [ ] O The codes (4-digit numbers) entered in Part VIII Description of Hazardous Wastes are not consistent with those listed in the Massachusetts Regulations 310 CMR.
- [ ] o The applicant failed to sign the form under Part X Certification.

These deficiencies need to be resolved before EPA can begin the process of assigning your facility an EPA Identification Number. After completing the form, return it to me at:

U.S. Environmental Protection Agency
Waste Management Branch
JFK Federal Building - Room 2211
Boston, MA 02203
HRR-CAUS

If you need any assistance in resolving this matter, please contact the Compliance Branch of the Department of Environmental Quality Engineering at (617) 292-5898.

Sincerely,

Tanya Sweeney, Chemical Engineer MA Waste Regulation Section

Enclosure

## NOTIFICATION PROCEDURE

If your shop produces a hazardous waste, you are subject to a national system which tracks your waste from the point of generation to its final disposal. In Massachusetts you are required to use a transporter and disposal facility which are licensed to handle hazardous waste. An 8-part shipping document, called a "manifest," follows the waste from "cradle" to "grave." You should keep a copy of each manifest in your files for a minimum of three years.

The first step in the manifest system, once you have identified your waste, is to obtain a federal identification number. For assistance in completing this form, or in locating a transporter or disposal facility, telephone the Massachusetts Department of Environmental Quality Engineering (617)292-5898.

#### WHERE TO FILE

When you have completed your notification form, sign it and mail it to:

Gwen Ruta EPA - Region I/ MA Waste Mgmt. Branch HRR-CAUS JFK Federal Bldg. Boston, MA 02203

## LINE BY LINE INSTRUCTIONS

PRINT IN BLACK INK OR TYPE, LEAVING A BLANK BOX BETWEEN WORDS.

- I. Name of Installation. "Installation" means your business. Do not punctuate. If initials are used in the legal name, leave a blank box between initials.
- II. Installation Mailing Address. Abbreviate "street" or "parkway" and similar words.
- III. Location of Installation. Print "SAME" if the location is the same as the mailing address. Include a street number, or, if none, the nearest cross street.
- IV. Principal Activity. The standard industrial classification (SIC) is a 4-digit code:
  - 5544 Gasoline Service Station 3491 Metal fabrication 7536 General Automotive Repair Shop 3541 Machine Shop
- V. <u>Installation Contact</u>. Enter the name (last name first), job title and business telephone number of the person who should be contacted regarding information submitted on this form.
- VI. Ownership. Print name of legal owner of the company listed in Line I. In the second row print "SAME" if the legal owner of the property is also the legal owner of the business. Unless you are owned or operated by the federal government, check Non-Federal.
- VII. Type of Hazardous Waste Activity. If, in a month's time, you produce no more than a total of 2200 pounds (about 250 gallons) of hazardous waste and you accumulate no more than this at any one time, you qualify as a SMALL QUANTITY GENERATOR. A LARGE QUANTITY GENERATOR is defined as one who produces over this amount in a month. Large generators have a limit of 90 days to accumulate their waste. Small quantity generators have a maximum of 180 days before they must ship their hazardous waste off-site.

WASTE FUEL ACTIVITY is checked if you sell or offer waste oil directly to one who burns waste fuels for energy recovery or if you burn waste oil or solvents. Burners are subject to a recycling permit. For information or a permit application, contact DEQE (617) 292-5786 or 292-5905.

VIII. Description of Hazardous Wastes. Hazardous wastes are classified according to their characteristics - ignitable, corrosive, reactive or toxic. In addition, there are many individual chemicals and compounds listed as hazardous. For a complete listing of wastes, consult the Massachusetts Hazardous Waste Management Regulations (310 CMR 30.000) which are available through the State House Bookstore (617)727-2834.

Some of the most common wastes produced by machine and repair shops are:

Waste Petroleum Naptha (Mineral Spirits)	Waste Code
Because the flash point is less than 140° F this solvent is classified as an ignitable waste.	D001
Waste Compound Cleaning Liquid	F002
This solvent is typically used for cleaning carburetors.	
Paint Thinners and Flammable Paint Wastes	D001

Lead Paint D008

Although most paints manufactured within the past five years have a low percent of lead, some lead paint wastes are toxic. (5.0 milligrams per liter or more is toxic.) To determine this, a special toxicity test may be required.

# Waste Oil and Grease M001

EACH TYPE OF WASTE SHOULD BE STORED SEPARATELY IN A SAFE, TIGHT CONTAINER AND PROPERLY LABELED WITH THE TYPE OF WASTE AND ITS HAZARDS AND THE INITIAL DATE OF ACCUMULATION.

- IX. Comments. Additional information can be entered here.
- X. <u>Certification</u>. The owner or an authorized representative should sign. Unsigned forms will be returned for signature.

## To change information submitted on this form:

Please notify DEQE in writing if you move, change the name of your business, your mailing address, or type of wastes, or any other items in the notification form.



# COMMONWEALTH OF MASSACHUSETTS Department of Environmental Quality Engineering



# NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

For Official Use Only	INSTALLATION'S EPA I.D. NUMBER DATE ISSUED mo. day year				
Print or type with ELITE type (12 characters/inch) in the boxes. Refer	to Line-by-Line Instructions.				
1. NAME OF INSTALLATION (Do not punctuate or use initials)					
B LMARH MUHU DERH					
II. INSTALLATION MAILING ADDRESS					
Street or Post Office Box	FEB 1 7 1987				
12211 MORTH HAMDTON	517				
City or Town State	Zip Code				
HOTYORE MA	01099-1111				
III. LOCATION OF INSTALLATION	2				
Street or Route Number					
SAME BULL MORTHAMOR	649 5VT				
City or Town State	Zip Code				
HOIGORE MG	01090-111				
IV. PRINCIPAL ACTIVITY	·				
4 digit SIC number Description 4 digit S	IC number Description				
7536 WASte 01/	L				
V. INSTALLATION CONTACT	Phone Number				
Name (last, first) Title	(area code) (number)				
Magsemuk Zaugoz BIII DI	ISF MRIS 1 4113 763 4594				
VI. OWNERSHIP	T(0				
Name of Installation's Legal Owner	Type of Ownership  FEDERAL □ NON-FEDERAL				
Name of the Legal Owner of the Property					
KMARH CORD					
VIII TYPE OF HAZAPPONIC MACTE ACTIVITY Futor Y or	THE OF LITTING ACTIVITY Further V and the contract of the Cont				
VII. TYPE OF HAZARDOUS WASTE ACTIVITY Enter X on the appropriate line.					
Hazardous Waste Activity Waste Fuel Activity	Type of Combustion Device				
Large quantity generator Generator marketing to Small quantity generator Other marketer	burner 16 a burner, specify:  Utility boiler				
	Industrial boiler				
Treater/Storer/Disposer *	Industrial furnace				
Wastewater Treatment Unit	used oil fuel ** A Massachusetts recycling permit				
6 A Massachusetts license is required for these activities.  Specification used	is required.				
Please continue on the second page of this form.					

Enter the four-dig	OF HAZARDOUS WAS it number from the Massach	usetts Regulations	310 CMR for each li	sted hazardous waste v	which your in-
stallation handles	. Use additional sheets if neo	cessary.	TION OF HAZ	NOTIFICA	
D codes - Ch	aracteristic Non-Lis	ted Hazardous	Wastes. See 3	0.121 through 30	.125.
F and M code	s - Hazardous Wastes	from Non-Spe	cific Sources.	See 30.131.	
movi					BUILD
					A
K codes - Ha	zardous Wastes from	Specific Sour	ces. See 30.13	2.	(New or Town
	TI PAP			I BXS	
				10 all a	NO Roug
U codes - Co	mmercial Chemical Pr	oduct Hazardo	us Wastes. See	30.133.	
	111-1998			1 11/20/0	1001
	o po a	de de Element			
P codes - Ac	utely Hazardous Wast	es. See 30.1	36.	CON CONTACT	
THE RESERVE	AKS CHAS			N) 112 a 464	
. COMMENTS	samu(Chicama)	П	4	IP Ilabon's Least Owner	A. OWNERSH
☐ Sheet Attached	EJASIGR [[]				
. CERTIFICATIO	V		ed viluina		
ments, and that based	nalty of law that I have personally ex on my inquiry of those individuals i mplete. I am aware that there are si	immediately responsible	e for obtaining the inform	ation, I believe that the subm	nitted information is
In addition, I und such material be kept	erstand that any material supplied w confidential and and the Departme nd Confidentiality of Department R	nt has made a determin	nation of confidentiality in	accordance with 310 CMR 3	lly requested that 1.00, Regulations
SIGNATURE Miles	Hraschel.	NAME & OFFIC	IAL TITLE (type or p.	rint) DATE SIGN	0-

# HAZARDOUS WASTE FACTS FOR COMPANIES USING PARTS CLEANING SERVICES

## NOTIFICATION PROCEDURE

If your shop produces a hazardous waste, you are subject to a national system which tracks your waste from the point of generation to its final disposal. In Massachusetts you are required to use a transporter and disposal facility which are licensed to handle hazardous waste. An 8-part shipping document, called a "manifest," follows the waste from "cradle" to "grave." You should keep a copy of each manifest in your files for a minimum of three years.

The first step in the manifest system, once you have identified your waste, is to obtain a federal identification number. For assistance in completing this form, or in locating a transporter or disposal facility, telephone the Massachusetts Department of Environmental Quality Engineering (617)292-5898.

## WHERE TO FILE

When you have completed your notification form, sign it and mail it to:

Gwen Ruta Vanya Swelney EPA - Region I/ MA Waste Mgmt. Branch HRR-CAUS JFK Federal Bldg. Boston, MA 02203

## LINE BY LINE INSTRUCTIONS

# PRINT IN BLACK INK OR TYPE, LEAVING A BLANK BOX BETWEEN WORDS.

- I. Name of Installation. "Installation" means your business. Do not punctuate. If initials are used in the legal name, leave a blank box between initials.
- II. <u>Installation Mailing Address</u>. Abbreviate "street" or "parkway" and similar words.
- III. Location of Installation. Print "SAME" if the location is the same as the mailing address. Include a street number, or, if none, the nearest cross street.
- IV. <u>Principal Activity</u>. The standard industrial classification (SIC) is a 4-digit code:
  5544 Gasoline Service Station 3491 Metal fabrication

7536 General Automotive Repair Shop
3491 Metal fabrication
3541 Machine Shop

- V. <u>Installation Contact</u>. Enter the name (last name first), job title and business telephone number of the person who should be contacted regarding information submitted on this form.
- VI. Ownership. Print name of legal owner of the company listed in Line I. In the second row print "SAME" if the legal owner of the property is also the legal owner of the business. Unless you are owned or operated by the federal government, check Non-Federal.
- VII. Type of Hazardous Waste Activity. If, in a month's time, you produce no more than a total of 2200 pounds (about 250 gallons) of hazardous waste and you accumulate no more than this at any one time, you qualify as a SMALL QUANTITY GENERATOR. A LARGE QUANTITY GENERATOR is defined as one who produces over this amount in a month. Large generators have a limit of 90 days to accumulate their waste. Small quantity generators have a maximum of 180 days before they must ship their hazardous waste off-site.

WASTE FUEL ACTIVITY is checked if you sell or offer waste oil directly to one who burns waste fuels for energy recovery or if you burn waste oil or solvents. Burners are subject to a recycling permit. For information or a permit application, contact DEQE (617) 292-5786 or 292-5905.

VIII. Description of Hazardous Wastes. Hazardous wastes are classified according to their characteristics - ignitable, corrosive, reactive or toxic. In addition, there are many individual chemicals and compounds listed as hazardous. For a complete listing of wastes, consult the Massachusetts Hazardous Waste Management Regulations (310 CMR 30.000) which are available through the State House Bookstore (617)727-2834.

Some of the most common wastes produced by machine and repair shops are:

# Waste Petroleum Naptha (Mineral Spirits)

Waste Code

Because the flash point is less than  $140^{\circ}$  F this solvent is classified as an ignitable waste.

D001

Waste Compound Cleaning Liquid

F002

This solvent is typically used for cleaning carburetors.

## Paint Thinners and Flammable Paint Wastes

D001

Lead Paint

D008

Although most paints manufactured within the past five years have a low percent of lead, some lead paint wastes are toxic. (5.0 milligrams per liter or more is toxic.) To determine this, a special toxicity test may be required.

## Waste Oil and Grease

M001

EACH TYPE OF WASTE SHOULD BE STORED SEPARATELY IN A SAFE, TIGHT CONTAINER AND PROPERLY LABELED WITH THE TYPE OF WASTE AND ITS HAZARDS AND THE INITIAL DATE OF ACCUMULATION.

- IX. Comments. Additional information can be entered here.
- X. <u>Certification</u>. The owner or an authorized representative should sign. Unsigned forms will be returned for signature.

# To change information submitted on this form:

Please notify DEQE in writing if you move, change the name of your business, your mailing address, or type of wastes, or any other items in the notification form.



# COMMONWEALTH OF MASSACHUSETTS Department of Environmental Quality Engineering NOTIFICATION OF HAZARDOUS WASTE ACTIVITY



For Official Use Only  INSTALLATION'S EPAI.D. NUMBER  DATE ISSUED  mo. day year					
Print or type with ELITE type (12 characters/inch) in the boxes. Refer to Line-by-Line Instructions.					
I. NAME OF INSTALLATION (Do not punctuate or use initials)  FEB 17 1987					
II. INSTALLATION MAILING ADDRESS Street or Post Office Box					
City or Town State Zip Code MG DIO 4 B-					
III. LOCATION OF INSTALLATION Street or Route Number					
City or Town State Zip Code					
1V. PRINCIPAL ACTIVITY 4 digit SIC number Description  7536  MASTE 01  Description  Description					
V. INSTALLATION CONTACT Name (last, first)  Title  Phone Number (area code) (number)  DLSH MASI 9/13 78/3 9/59/9					
VI. OWNERSHIP  Name of Installation's Legal Owner  Name of the Legal Owner of the Property  Man A CORP					
VII. TYPE OF HAZARDOUS WASTE ACTIVITY Enter X on the appropriate line.					
Hazardous Waste Activity Waste Fuel Activity Type of Combustion Device					
Large quantity generator Cenerator marketing to burner If a burner, specify:					
Small quantity generator Other marketer Utility boiler					
Hazardous waste fuel					
* A Massachusetts license is required for these activities.  Off specification used oil fuel is required.  Specification used oil fuel					
Please continue on the second page of this form.					

VIII.DESCRIPTION OF HAZARDOUS WASTES  Enter the four-digit number from the Massachusetts Regulations 310 CMR for each listed hazardous waste which your stallation handles. Use additional sheets if necessary.	rin-			
D codes - Characteristic Non-Listed Hazardous Wastes. See 30.121 through 30.125.				
	Ш			
F and M codes - Hazardous Wastes from Non-Specific Sources. See 30.131.				
ADDI III III III III III III III III III	П			
K codes - Hazardous Wastes from Specific Sources. See 30.132.				
U codes - Commercial Chemical Product Hazardous Wastes. See 30.133.				
The Actual Actua				
P codes - Acutely Hazardous Wastes. See 30.136.				
IX. COMMENTS	W DV			
☐ Sheet Attached				
X. CERTIFICATION				
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.				
In addition, I understand that any material supplied with this application will not be considered confidential unless I have specifically requested that such material be kept confidential and and the Department has made a determination of confidentiality in accordance with 310 CMR 3.00, Regulations Governing Access to and Confidentiality of Department Records and Files under the Hazardous Waste Management Act.				
SIGNATURE NAME & OFFICIAL TITLE (type or print) DATE SIGNED 2-11-8	7			

## HAZARDOUS WASTE FACTS FOR COMPANIES USING PARTS CLEANING SERVICES

## NOTIFICATION PROCEDURE

If your shop produces a hazardous waste, you are subject to a national system which tracks your waste from the point of generation to its final disposal. In Massachusetts you are required to use a transporter and disposal facility which are licensed to handle hazardous waste. An 8-part shipping document, called a "manifest," follows the waste from "cradle" to "grave." You should keep a copy of each manifest in your files for a minimum of three years.

The first step in the manifest system, once you have identified your waste, is to obtain a federal identification number. For assistance in completing this form, or in locating a transporter or disposal facility, telephone the Massachusetts Department of Environmental Quality Engineering (617)292-5898.

## WHERE TO FILE

When you have completed your notification form, sign it and mail it to:

Gwen Ruta EPA - Region I/ MA Waste Mgmt. Branch HRR-CAUS JFK Federal Bldg. Boston, MA 02203

## LINE BY LINE INSTRUCTIONS

## PRINT IN BLACK INK OR TYPE, LEAVING A BLANK BOX BETWEEN WORDS.

- I. Name of Installation. "Installation" means your business. Do not punctuate. If initials are used in the legal name, leave a blank box between initials.
- II. Installation Mailing Address. Abbreviate "street" or "parkway" and similar words.
- III. Location of Installation. Print "SAME" if the location is the same as the mailing address. Include a street number, or, if none, the nearest cross street.
- IV. Principal Activity. The standard industrial classification (SIC) is a 4-digit code:
  - 5544 Gasoline Service Station 3491 Metal fabrication 7536 General Automotive Repair Shop 3541 Machine Shop
- V. <u>Installation Contact</u>. Enter the name (last name first), job title and business telephone number of the person who should be contacted regarding information submitted on this form.
- VI. Ownership. Print name of legal owner of the company listed in Line I. In the second row print "SAME" if the legal owner of the property is also the legal owner of the business. Unless you are owned or operated by the federal government, check Non-Federal.
- VII. Type of Hazardous Waste Activity. If, in a month's time, you produce no more than a total of 2200 pounds (about 250 gallons) of hazardous waste and you accumulate no more than this at any one time, you qualify as a SMALL QUANTITY GENERATOR. A LARGE QUANTITY GENERATOR is defined as one who produces over this amount in a month. Large generators have a limit of 90 days to accumulate their waste. Small quantity generators have a maximum of 180 days before they must ship their hazardous waste off-site.

WASTE FUEL ACTIVITY is checked if you sell or offer waste oil directly to one who burns waste fuels for energy recovery or if you burn waste oil or solvents. Burners are subject to a recycling permit. For information or a permit application, contact DEQE (617) 292-5786 or 292-5905.

VIII. Description of Hazardous Wastes. Hazardous wastes are classified according to their characteristics - ignitable, corrosive, reactive or toxic. In addition, there are many individual chemicals and compounds listed as hazardous. For a complete listing of wastes, consult the Massachusetts Hazardous Waste Management Regulations (310 CMR 30.000) which are available through the State House Bookstore (617)727-2834.

Some of the most common wastes produced by machine and repair shops are:

## Waste Code Waste Petroleum Naptha (Mineral Spirits) Because the flash point is less than 140° F this solvent is classified as an ignitable waste. D001 Waste Compound Cleaning Liquid F002 This solvent is typically used for cleaning carburetors.

#### Paint Thinners and Flammable Paint Wastes D001

#### Lead Paint D008

Although most paints manufactured within the past five years have a low percent of lead, some lead paint wastes are toxic. (5.0 milligrams per liter or more is toxic.) To determine this, a special toxicity test may be required.

## Waste Oil and Grease

M001

EACH TYPE OF WASTE SHOULD BE STORED SEPARATELY IN A SAFE. TIGHT CONTAINER AND PROPERLY LABELED WITH THE TYPE OF WASTE AND ITS HAZARDS AND THE INITIAL DATE OF ACCUMULATION.

- IX. Comments. Additional information can be entered here.
- Χ. Certification. The owner or an authorized representative should sign. Unsigned forms will be returned for signature.

# To change information submitted on this form:

Please notify DEQE in writing if you move, change the name of your business, your mailing address, or type of wastes, or any other items in the notification form.